



# Motor Vehicle Division

96-0158 R09/05 www.azdot.gov

Mail Drop 521M  
Motor Carrier and Tax Services  
Motor Vehicle Division  
PO Box 2100  
Phoenix AZ 85001-2100

## IFTA USE FUEL REFUND REQUEST

Account Name		IFTA Account Number	
Mailing Address	City	State	Zip
Street Address (if different from above)	City	State	Zip

This form is for use fuel purchased in Arizona, but used in another state.

- Must be completed in full, with all required attachments, and mailed to the address above.
- Taxes for both Arizona and the other state must have been paid.
- Application for refund must be filed within 3 years of purchase.
- Attach a copy of your IFTA Report for **each** reporting period covered on this form.
- Attach a copy of your IFTA License for refund periods requested.
- No refund will be made for amounts less than \$50.00 except if the 3 year statute of limitations is expiring.

Quarter Ending	Gallons	Tax Rate	Amount
		x \$.02 =	\$
		x \$.02 =	\$
		x \$.02 =	\$
		x \$.02 =	\$
Total Refund Due			\$

I certify that I paid the Arizona tax on all of the gallons claimed above.

Authorized Signature	Title	Date
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Authorized signer must be the taxpayer or officer representing the taxpayer (others require that a **power of attorney** be attached or on file with MVD).

Preparer Name	Title	
Preparer Signature	Phone Number (      )	Date

Account Number (MVD Use) <b>G -</b>
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Claim Number (MVD Use)
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